ISDH Annual Fiscal Report of a Nonprofit Acute Care Hospital

# **Hospital: Parkview Huntington Hospital**

Year: 2004 City: Huntington Peer Group: Medium

**Statement One: Summary of Revenue and Expenses** 

1. Gross Patient Service Revenue					
Inpatient Patient Service Revenue	\$19,506,302				
Outpatient Patient Service Revenue	\$39,298,686				
Total Gross Patient Service Revenue	\$58,894,988				
2. Deductions from Rev	venue				
Contractual Allowances	\$21,139,198				
Other Deductions	\$1,384,181				
Total Deductions	\$22,253,379				
3. Total Operating Revenue					
Net Patient Service Revenue	\$36,371,609				
Other Operating Revenue	\$1,307,583				

4. Operating Expense	es
Salaries and Wages	\$11,577,171
Employee Benefits and Taxes	\$3,121,175
Depreciation and Amortization	\$835,468
Interest Expenses	\$2,095
Bad Debt	\$3,596,283
Other Expenses	\$13,084,449
Total Operating Expenses	\$32,216,641
5. Net Revenue and Expe	enses
Net Operating Revenue over Expenses	\$5,462,551
Net Non-operating Gains over Losses	\$103,391
Total Net Gain over Loss	\$5,564,943

Total Operating Revenue	\$37,679,192
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6. Assets and Liabilities				
Total Assets	\$17,935,821			
Total Liabilities	\$17,935,821			

Statement Two: Contractual Allowances						
Revenue Source	Gross Patient Revenue	Contractual Allowances	Net Patient Service Revenue			
Medicare	\$20,339,223	\$13,077,893	\$7,261,330			
Medicaid	\$8,461,439	\$4,585,888	\$3,875,551			
Other State	\$0	\$0	\$0			
Local Government	\$0	\$0	\$0			
Commercial Insurance	\$30,094,326	\$3,475,417	\$26,618,909			
Total	\$58,894,988	\$21,139,398	\$37,755,790			

Statement Three: Unique Specialized Hospital Funds						
Fund Category	Estimated Incoming Revenue from Others	Estimated Outgoing Expenses to Others	Net Dollar Gain or Loss after Adjustment			
Donations	\$0	\$40,941	(\$40,941)			

Educational	\$41,428	\$459,368	(\$417,940)
Research	\$0	\$0	\$0
Bioterrorism Grant	\$75,000	\$75,000	\$0

Number of individuals estimated by this hospital that are involved	ed in education
Number of Medical Professionals Trained In This Hospital	0
Number of Hospital Patients Educated In This Hospital	43,617
Number of Citizens Exposed to Health Education Message	65,569

### Statement Four Annual Summarized Community Benefit Statement on Nonprofit Hospital

This hospital is a nonprofit organization and files an annual community benefit statement with the Department under Indiana Code 16-21-9. Each nonprofit hospital must confirm its mission statement, document the number of persons and dollars allocated under its adopted charity care policy, and describe the progress of the community to achieve specific objectives set by the hospital.

County	Huntington	Community	Huntington Countyt
Location		Served	

## **Hospital Mission Statement**

"Parkview Health System will provide quality health services to all who entrust their care to us and we will work to improve he health of our communities".

Unique Services	Type of Initiatives	<b>Document Available</b>

Medical Research	NO	Disease Detection	YES	Community Plan	YES
Professional Education	NO	Practitioner Education	NO	Annual Statement	YES
Community Education	YES	Clinic Support	NO	Needs Assessment	2001

#### Allocation of Dollars and Persons Served under Adopted Charity Policy

Most nonprofit hospitals adopt a charity benefit policy to serve the medically indigent. On an annual basis, the hospital will confirm the eligibility and set aside dollars to ensure low-income persons can be offered needed inpatient and outpatient hospital services.

	2002	2003	2004
Persons served in last twelve months	368	708	814
Charity Care Allocation	(\$179,922)	(\$274,804)	(\$421,343)

#### Hospital Community Benefit Projects and the Projects' Net Cost

On an annual basis, all nonprofit hospitals will report on the progress that the local community has made in reducing the incidence of disease and improving the delivery of health services in the community.

Name of Program and Description of Progress Made in Achieving Annual Objectives	Net Costs of Programs
Kids Kampus Nurse	(\$50,979)
Athletic Training at High School	(\$59,714)
Hunington County Rescue Unit	(\$50,000)

Automated External Defib and Training	(\$32,268)
All Other Programs	(\$224,979)
Subtotal	(\$417,940)

# Summary of Unreimbursed Costs of Charity Care, Government Funded Programs, and Community Benefits

Based on uniform definitions of costs, each nonprofit hospital must identify the costs of serving its community that are not reimbursed by government and other third party payers.

Specialized Programs	Unreimbursed Costs
1. Total unreimbursed costs of providing care to patients	(\$2,215,056)
unable to pay, to patients covered under government	
funded programs, and for medical education, training.  2. Community Health Education	(\$417,940)
3. Community Programs and Services	\$0
4. Other Unreimbursed Costs	\$0
5. Total Costs of Providing Community Benefits	(\$2,632,996)

# **Identification of Additional Non-Hospital Charity Costs**

In addition, some hospitals will have non-hospital organizations under its ISDH license are providing community benefits in this fiscal year.

Organization Providing Charity Care	Net Costs of Care
None	\$0

# For further information on these initiatives, contact:

Hospital Representative: Greg Schnepf

Telephone number: 260/355-3303

Web Address Information: www.Parkview.com

# ISDH STATISTICAL COMPARISON BETWEEN THIS HOSPITAL AND OTHER HOSPITALS IN ITS PEER GROUP

PERFORMANCE INDICATOR	METHODOLOGY	THIS HOSPITAL'S RESULTS	PEER GROUP AVERAGE
1. # of FTE's	Number of Full Time Equivalents	261	656
2. % of Salary	Salary Expenses divided by Total Expenses	35.9%	38.3%
3. Average Daily Census	Patient Days divided by annual days (365 days)	16.0	58.6

4. Average Length of Stay	Number of Patient Days divided by the Number of Discharges	2.7	4.3
5. Price for Medical/Surgical per stay	Total Medical/Surgical charges divided by Medical/Surgical discharges	\$2,538	\$4,999
6. Gross Price per Discharge	Gross Inpatient Revenue divided by the Total Discharges	\$9,119	\$13,629
7. Outpatient Revenue Percentage	Outpatient Revenue divided by the Gross Total Revenue	66.7%	53.7%
8. Gross Price per Visit	Gross Outpatient Revenue divided by the Total Outpatient Visits	\$876	\$993
9. % of Medicare	Medicare Revenue divided by the Gross Patient Revenue	34.5%	43.0%
10. % of Bad Debt	Bad Debt Expense divided by the Gross Operating Expenses	11.2%	6.2%
11. Charity Allocation	Unreimbursed costs of providing services to patients under adopted charity policy	(\$421,343)	(\$1,233,371)
12. Net Margin	Excess of Revenue over Expenses divided by the Total Operating Revenue	14.5	6.3

### Notes:

- NR = Not Reported
   See Statewide Results for definitions of terms.